

# PART B - FEE(S) TRANSMITTAL

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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

26379 7590 04/22/2002

GARY CARY WARE & FREIDENRICH  
1755 EMBARCADERO  
PALO ALTO, CA 94303-3340



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## Certificate of Mailing

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

Kathleen LaBrie

(Depositor's name)

*Kathleen LaBrie*

(Signature)

May 15, 2002

(Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
|-----------------|-------------|----------------------|---------------------|------------------|

09/989,472

11/19/2001

Stephen Jackson

2102385-901710

9975

TITLE OF INVENTION: ADJUSTABLE SEAT COVERS FOR HIGH OR LOW BACK SEATS

| TOTAL CLAIMS | APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|--------------|-------------|--------------|-----------|-----------------|------------------|----------|
|--------------|-------------|--------------|-----------|-----------------|------------------|----------|

23

nonprovisional

YES

\$640

\$300

\$940

07/22/2002

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|----------|----------|----------------|
|----------|----------|----------------|

BARFIELD, ANTHONY DERRELL

3636

297-228120

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Gray Cary Ware & Freidenrich LLP

2 \_\_\_\_\_  
3 \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

USA Products

Lodi, California

Please check the appropriate assignee category or categories (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee

☒ Publication Fee

☒ Advance Order - # of Copies

10

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☐ Payment by credit card. Form PTO-2038 is attached.

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(Authorized Signature)

(Date)

*W. H. Smith*

May 15, 2002

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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06/06/2002 CCHAU2 00000048 09989472

01 FC:242

640.00 OP

02 FC:561

30.00 OP

03 FC:195

300.00 OP

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